觤	Washington State Department of Social & Health Services
LOCATION (AF	REA, BUILDING)

Washington State Department of Social & Health Services	JUVENILE REHABILITATION ADMINISTRATION (JRA) WORK REQUEST		WORK REQUEST NUMBER	DATE OF REQUEST	
LOCATION (AREA, BUILDING)					
REQUESTED BY:		REQUESTOR'S TELEPHONE NUMBER	APPRO\	VED BY:	
Plant manager:	☐ Disapproved	Priority: 🗌 1	]2 [	3 4	
COMMENTS					
DESCRIPTION OF WORK REQUESTED					

MANUAL HOURS ESTIMATED ACTUAL

MATERIALS COST

\$

COMPLETED BY:

DATE

DSHS 02-327 (REV. 10/2000)

DATE RECEIVED

ASSIGNED TO: